



APPLICATION FOR ABSENTEE BALLOT—REGISTERED VOTER

IMPORTANT!! Please give the following information for identification:

Date of Birth_____

I, (print name)_____hereby apply for an absentee ballot for the Friendship Heights Election to be held on Monday, May 11, 2015, and this is the only application I am submitting.

I am a resident of the Village of Friendship Heights at the following address:

Number and Street_____

City and Zip Code_____

SEND ME THE BALLOT AT THE FOLLOWING ADDRESS (Note: use the mailing address at which mail reaches you most promptly. Include rank and serial number if in the Armed Forces):

Number and Street_____

City, State and Zip Code_____

Signature_____Date_____

(Application will not be processed without signature)

ABSENTEE BALLOTS WILL ONLY BE ISSUED ON WRITTEN APPLICATION. TO ALLOW FOR MAILING TIME, THIS COMPLETED APPLICATION MUST BE RECEIVED BY FRIDAY, MAY 1, 2015* AT THE FOLLOWING ADDRESS:

The League of Women Voters of Montgomery County
12216 Parklawn Drive, Suite 101, Rockville, Maryland 20852

(*If unable to meet this deadline, leave a message at 301 984-9585, or e-mail lwvmc@erols.com)

Revised 2/23/15